

Please print or type. (Form designed for use on elite (12-pitch typewriter).)

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. C1A1X101010101316141813		Manifest Document No.	2. Page 1 of 1	Information in the shaded areas is not required by Federal law.	
		3. Generator's Name and Mailing Address PARA PLATE 15910 SHOEMAKER, CERRITOS, CA 90701		A. State Manifest Document Number 88677598		B. State Generator's ID	
4. Generator's Phone (213) 404-3434		5. Transporter 1 Company Name OMEGA RECOVERY SERVICES		6. US EPA ID Number C1A1D101422451011		C. State Transporter's ID 010384	
7. Transporter 2 Company Name		8. US EPA ID Number		D. Transporter's Phone (213) 698-0991		E. State Transporter's ID	
9. Designated Facility Name and Site Address OMEGA RECOVERY SERVICES 12504 E. WHITTIER BLVD WHITTIER, CA 90602		10. US EPA ID Number C1A1D101422451011		F. Transporter's Phone		G. State Facility's ID 0A10042245001	
				H. Facility's Phone (213) 698-0991			
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number) a. WASTE ORM-A N.O.S NA 1693 ORM-A (FLEXOSOLVENT)				12. Containers No. Type 01012 DIM	13. Total Quantity a. 55 G	14. Unit Wt/Vol	
						Waste No.	
						State	
						EPA/Other	
						State	
						EPA/Other	
						State	
						EPA/Other	
J. Additional Descriptions for Materials Listed Above				K. Handling Codes for Wastes Listed Above			
				a. b. c. d.			
15. Special Handling Instructions and Additional Information							
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.							
Printed/Typed Name Tony Skratulig				Signature Tony Skratulig		Month Day Year 07/11/89	
17. Transporter 1 Acknowledgement of Receipt of Materials				Printed/Typed Name JAVIER HERNANDEZ		Signature Javier Hernandez	
				Month Day Year 10/21/00		9	
18. Transporter 2 Acknowledgement of Receipt of Materials				Printed/Typed Name		Signature	
				Month Day Year			
19. Discrepancy Indication Space							
20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in item 19							
Printed/Typed Name FRANK FORD				Signature Frank Ford		Month Day Year 07/11/89	